PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10810363

CLAIRIC AC FILED DADE:												
CLAIMS AS FILED - PART I								SMALL	ENTITY		OTHE	R THAN
<u> -</u>			(Colur	(Column 1)		(Column 2)		TYPE		OR		ENTITY
TOTAL CLAIMS								RATE	, FEE	7	RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FI	EE 385.0	0 OR	BASIC FEE	770.00
T	OTAL CHARGE	EABLE CLAIMS	111	ninus 20=	٠ ر			X\$ 9=		OR	X\$18=	
ΙN	DEPENDENT (CLAIMS		minus 3 = 0				X43=	1	OR	Yes	
М	ULTIPLE DEPE	ENDENT CLAIM I	RESENT					-	+	-100		<u> </u>
•	f the differenc	e in column 1 is	s less than	zero, enter "0" in column 2				+145=		OR	+290=	
						COMMITTEE		TOTAL		OR	TOTAL	470
	(CLAIMS AS / (Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3				SMALL	. ENTITY	OR	OTHER SMALL	
		CLAIMS		HIGHE		(00:0:1:1:0)	ר ר			י`` ו י		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL
P M	Total	*	Minus	**	ON	=		X\$ 9=	FEE	OR	X\$18=	FEE
ME	Independent	*	Minus	***		= .	ŀ	X43=	 	1	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	740=	ļ	OR	A00=	
								+145=		OR	+290=	·
					٠		Δ:	TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE	
•		(Column 1)		(Colum	n 2i	(Column 3)		DD11. FEE		_ ^	ADDIT. PEET	
		CLAIMS		HIGHE		100.0			455	7 .		
Ė		REMAINING AFTER		NUMB		PRESENT		RATE	ADDI- TIONAL			ADDI-
E N		AMENDMENT	į	PREVIOU PAID F		EXTRA		DAIL	FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**	/ 1 - 2	=	T	X\$ 9=		OR	X\$18=	
ME	Independent		Minus	***		= .	十	Y40				
۸	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						L	X43=		OR	X86=	
								+145=		OR	+290=	
								TOTAL		OR A	TOTAL	
		AL.	DIT. FEE		a A	DDIT. FEE L						
П	`	(Column 1) CLAIMS		(Column		(Column 3)				· · _		
ا 2		REMAINING		NUMBE	R .	PRESENT	1		ADDI-			ADDI-
2		AFTER AMENDMENT		PREVIOU PAID FO		EXTRA	1	RATE	TIONAL		RATE	TIONAL
\[\]	Total		Minus	-	<u>" </u>		-		FEE	' -		FEE
┇┟	Independent	*	Minus Minus	**		=		X\$ 9=		OR	X\$18=	
₹	FIRST PRESENTATION OF MUL				1			X43=		OR	X86=	
	ringi Phesei	NIATION OF MU	LTIPLE DEI	PENDENT C	LAIM		1	- 				
• 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **OR TOTAL ADDIT: FEE ADDIT: FEE												
T	he *Highest Numl	ber Previously Paid	For (Total or	o opace is le Independent	ess than is the h	3, enter *3.* highest number (ropriate box			